

WILKINSBURG POLICE DEPARTMENT

SILENT COMPLAINT FORM

- Use this form to report criminal or suspicious activity.
- You do not have to give your name or address so your identity will remain unknown.
- Please fill in as much information as possible.
- You do not need to fill in all spaces if information is not known.
- Thank you for taking the time to fill out this form. It will help us to serve you better.
- If you want to provide this information by phone, call (412) 244-2915, the Chief's line.

Date/time of criminal or s Location of activity	suspicious activity.				
Number of persons involve	ed and their descripti	ons.			
Name:		Name:			
Height:		Height:			
Weight:		Weight:			
Sex:		Sex:			
Race:		Race:			
Age:		Age:			
Describe the activity:					
Did you see a car used?	Yes	No			
Make:	Model:			olor:	
License Plate Number:					
Return:	Wilkinsburg Poli	-	ent		
On a dia	Wilkinsburg, PA				
Or via e-mail:	mgramby@wilkinsburgna.gov.or.gmitchell@wilkinsburgna.gov				